



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
Aging and Disability Services  
Aging and Long-Term Support Administration  
PO Box 45600, Olympia, WA 98504-5050

April 1, 2013

**CERTIFIED MAIL 7007 1490 0003 4202 4991**

Administrator  
Emeritus at South Hill  
3708 East 57<sup>th</sup> Avenue  
Spokane, WA 99223

Assisted Living Facility License #2089  
Licensee: Emeritus Corporation

**IMPOSITION OF CIVIL FINE AND  
STOP PLACMENT OF ADMISSIONS**

Dear Administrator:

This letter constitutes formal notice of the imposition stop placement of admissions and civil fine for your assisted living facility, located at **3708 East 57<sup>th</sup> Avenue, Spokane** by the State of Washington, Department of Social and Health Services, pursuant to Laws of 1998, Chapter 272 and RCW 18.20.190.

The civil fine for your assisted living facility, are based on violations of the Revised Code of Washington (RCW) and Washington Administrative Code (WAC) found by the department at your assisted living facility. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on March 19, 2013.

**WAC 388-78A 2450-1 Staff.**

**\$50.00 per incident x 94 incidents = \$4,700.00**

**The facility failed to ensure that residents had their calls for assistance responded to by staff in a timely manner.**

**This is a repeat deficiency cited on June 30, 2011.**

**WAC RCW 70.129-060 Grievances.**

**\$100.00**

**The facility failed to make prompt efforts to resolve grievances voiced by sixteen residents in the group meeting regarding long waits for staff response to calls for assistance. The facility**

failed to address residents' concerns related to food services; outside lighting; and care and services.

This is a repeat deficiency cited on June 30, 2011.

**WAC 388-78A-2120(2)(a)(b)(3)(a)(4) Monitoring residents' well-being.** **\$100.00**

The facility failed to identify, evaluate and/or take appropriate action for residents with changing conditions related to weight loss, skin injuries, incontinence, hygiene needs, and/or adaptive equipment for four residents.

This is a repeat deficiency cited on May 10, 2011, June 30, 2011, September 29, 2011, and January 3, 2012.

**WAC 388-78A-2210 Medication services.** **\$100.00**

Three residents did not receive medications as prescribed.

This is a repeat deficiency cited on October 31, 2011, January 3, 2012.

**WAC 388-78A-2300 Food and nutrition services.** **\$100.00**

The facility failed to ensure menus were written one week in advance and posted where residents could see them; and kitchen staff recorded substitutes and/or changes on the original menu and kept for six months. The facility failed to serve meals adjusted for individual preferences to the extent reasonably possible; and provide prescribed and non-prescribed modified or therapeutic diets and supplements as agreed upon per Negotiated Service Agreements.

This is a repeat deficiency cited on October 14, 2010, June 30, 2011, and April 3, 2012.

**WAC 388-78A-2305 Food sanitation.** **\$100.00**

The facility failed to manage and maintain the kitchen and food service in compliance with the Food Service WAC 246-215-005 (Compliance with 2001 Food Code, Chapters 1-8) related to overall cleanliness/maintenance of the kitchen/equipment and food handling practices to prevent cross contamination for sixty-seven residents.

This is a repeat deficiency cited on April 3, 2012.

**WAC 388-78A-2700 Safety measures and disaster preparedness.**

**\$100.00**

The facility failed to ensure investigations were documented and completed for accidents or incidents jeopardizing or affecting health or life of two residents with falls; one resident with a skin injury of unknown origin; and one resident who had a medication error.

This is a repeat deficiency cited on September 6, 2011, November 16, 2011, and December 13, 2011.

**WAC 388-78A-3040 Laundry.**

**\$100.00**

The facility failed to ensure dark assisted living facility laundry, including aprons worn by kitchen staff and caregivers, were sanitized either with the use of hot water measured at a minimum temperature of 140 degrees F at the washing machine intake, or with an automatically dispensed chemical sanitizer.

This is a repeat deficiency cited on April 3, 2012 and June 11, 2012.

**WAC 388-78A-3090 Maintenance and housekeeping.**

**\$100.00**

The facility failed to ensure that the common areas and laundry rooms used by residents and residents' apartments were kept in a clean, safe and in a well-maintained condition.

This is a repeat deficiency cited on October 14, 2010, June 30, 2011, April 3, 2012, and June 11, 2012.

The stop placement of admissions to your assisted living facility, are based on violations of the Revised Code of Washington (RCW) and Washington Administrative Code (WAC) found by the department at your assisted living facility. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on March 19, 2013.

**WAC 388-78A 2450-1 Staff.**

The facility failed to ensure that residents had their calls for assistance responded to by staff in a timely manner.

This is a repeat deficiency cited on June 30, 2011.

**WAC RCW 70.129-060 Grievances**

The facility failed to make prompt efforts to resolve grievances voiced by sixteen residents in the group meeting regarding long waits for staff response to calls for assistance. The facility failed to address residents' concerns related to food services; outside lighting; and care and services.

**This is a repeat deficiency cited on Jun 30, 2011.**

**WAC 388-78A-2120(2)(a)(b)(3)(a)(4) Monitoring residents' well-being.**

**The facility failed to identify, evaluate and/or take appropriate action for residents with changing conditions related to weight loss, skin injuries, incontinence, hygiene needs, and/or adaptive equipment for four residents.**

**WAC 388-78A-2210 Medication services**

**Three residents did not receive medications as prescribed.**

**WAC 388-78A-2300 Food and nutrition services**

**The facility failed to ensure menus were written one week in advance and posted where residents could see them; and kitchen staff recorded substitutes and/or changes on the original menu and kept for six months. The facility failed to serve meals adjusted for individual preferences to the extent reasonably possible; and provide prescribed and non-prescribed modified or therapeutic diets and supplements as agreed upon per Negotiated Service Agreements.**

**WAC 388-78A-2305 Food sanitation.**

**The facility failed to manage and maintain the kitchen and food service in compliance with the Food Service WAC 246-215-005 (Compliance with 2001 Food Code, Chapters 1-8) related to overall cleanliness/maintenance of the kitchen/equipment and food handling practices to prevent cross contamination for sixty-seven residents.**

**WAC 388-78A-2700 Safety measures and disaster preparedness.**

**The facility failed to ensure investigations were documented and completed for accidents or incidents jeopardizing or affecting health or life of two residents with falls; one resident with a skin injury of unknown origin; and one resident who had a medication error.**

**WAC 388-78A-3040 Laundry.**

**The facility failed to ensure dark colored assisted living facility laundry, including aprons worn by kitchen staff and caregivers, were sanitized either with the use of hot water measured at a minimum temperature of 140 degrees F at the washing machine intake, or with an automatically dispensed chemical sanitizer.**

**WAC 388-78A-3090 Maintenance and housekeeping.**

**The facility failed to ensure that the common areas and laundry rooms used by residents and residents' apartments were kept in a clean, safe and in a well-maintained condition.**

The stop placement order prohibiting admissions was verbally imposed on **April 1, 2013** and is effective immediately upon notice to you by certified mail receipt of this letter and the attached Statement of Deficiencies report. The stop placement order prohibiting admissions and imposition on the license will not be postponed pending an administrative hearing or informal dispute resolution process, as is required by RCW 18.20.190(4). The stop placement applies to all new admissions, re-admissions, and transfer of residents.

During the stop placement, you may not admit any new resident to your assisted living facility. In addition, you may not allow any resident who was absent from the home due to a temporary non-out-patient stay (not including out-patient treatment) at a hospital, nursing home or other treatment center to return during the stop placement unless you obtain advance approval from the department. You may request such approval by contacting Elena Madrid, Field Manager at (509) 323-7316.

Because it may not be possible to reach the Field Manager on a weekend or holiday, any pre-approval requests should be made as soon as possible during the business week. Such exceptions are made at the sole discretion of the department on a case-by-case basis. The department may impose sanctions or take other legal action if you fail to comply with the stop placement of admissions.

The department will terminate the stop placement order prohibiting admissions and imposition of civil fine, when the violations necessitating the stop placement have been corrected and you exhibit the capacity to maintain adequate care and service.

You may contest the imposition of a stop placement order prohibiting admissions and imposition of civil fine for- your home by requesting an administrative hearing. To do so, the Office of Administrative Hearings must receive your written request for a hearing within twenty-eight (28) calendar days following your receipt of this letter. A copy of this letter and a copy of the enclosed Statement of Deficiencies report must be included with your request. Send your request to:

**Office of Administrative Hearings  
PO Box 42489  
Olympia, Washington 98507-2489**

As provided in RCW 18.20, you may request an informal dispute resolution review of enforcement actions initiated in response to a Statement of Deficiencies report. During the informal dispute resolution process you also have the right to present written evidence refuting this action. A request for informal dispute resolution review will not change the deadline for you to request an administrative hearing. Informal dispute resolution review by the department is not binding in an administrative hearing.

To request an informal dispute resolution review, send your written request to:

**Informal Dispute Resolution Program Manager  
Aging and Disability Services Administration  
PO Box 45600  
Olympia, Washington 98504-5600  
Fax (360) 725-3225**

The written request should:

- Identify the citation and/or enforcement action that is disputed;
- Explain why you are disputing the action;
- Indicate the type of dispute resolution process you prefer (direct meeting, telephone conference or documentation review); and,
- Be sent within 10 working days of your receipt of this notice.

**Plan of Correction/Attestation**

**You must:**

Return the plan/attestation, on the enclosed report, within **10 calendar days** after you receive this letter. Include the following in you plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency. Send your Plan of Correction to:

Elena Madrid, Field Manager  
District 1, Unit A  
316 West Boone, Suite 170  
Spokane, WA 99201-2351  
Phone: (509) 323-7316 / Fax: (509) 329-3993

If you have any questions, please call Elena Madrid at (509) 323-7316.

Sincerely,

Lori Melchiori, Ph.D.  
Assistant Director  
Residential Care Services

Administrator  
Emeritus at South Hill  
April 1, 2013  
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cc: David Moon, Compliance Specialist  
RCS Field Manager – District 1, Unit A  
RCS District Administrator – District 1  
HCS Regional Administrator – Region 1  
DDD Regional Administrator – Region 1  
Washington State Long Term Care Ombudsman  
Area Agency on Aging, AAA- East  
Medicaid Fraud Control Unit  
Judi Plesha, HCS  
BAM